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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

NOV 16 2007

NOV 16, 2007

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

~~NOV 16 2007~~

AMIN JUMAH

~~MICHAEL W. DOBBINS~~
~~CLERK, U.S. DISTRICT COURT~~

(Enter above the full name
of the plaintiff or plaintiffs in
this action)

07CV6507
JUDGE KOCORAS
MAG. JUDGE MASON

vs.

Cas. _____
(To be supplied by the Clerk of this Court)

UNITED STATES OF AMERICA

DRUG ENFORCEMENT ADMINISTRATION

(Enter above the full name of ALL
defendants in this action. Do not
use "et al.")

CHECK ONE ONLY:

COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983
U.S. Code (state, county, or municipal defendants)

COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE
28 SECTION 1331 U.S. Code (federal defendants)

XXX _____ OTHER (cite statute, if known)

**BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

I. Plaintiff(s):

- A. Name: AMIN JUMAH
- B. List all aliases: AMIN ABD JUMA
- C. Prisoner identification number: 16819-424
- D. Place of present confinement: Metropolitan Correctional Center
- E. Address: 71 W Van Buren St Chicago, IL 60605

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

- A. Defendant: UNITED STATES OF AMERICA
- Title: DRUG ENFORCEMENT ADMINISTRATION
- Place of Employment: CHICAGO
- B. Defendant: _____
- Title: _____
- Place of Employment: _____
- C. Defendant: _____
- Title: _____
- Place of Employment: _____

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

III. Exhaustion of Administrative Remedies

You are required to exhaust all your available administrative remedies before bringing an action in federal court.

A. Is there a grievance procedure available at your institution?

YES () NO () If there is no grievance procedure, skip to F.

B. Have you filed a grievance concerning the facts in this complaint?

YES () NO ()

C. If your answer is YES:

1. What steps did you take?

2. What was the result?

3. If the grievance was not resolved to your satisfaction, did you appeal? What was the result (if there was no procedure for appeal, so state.)

D. If your answer is NO, explain why not:

- E. Is the grievance procedure now completed? YES () NO ()
- F. If there is no grievance procedure in the institution, did you complain to authorities?
YES (X) NO ()
- G. If your answer is YES:

1. What steps did you take?

I complained to the group leader many times.

2. What was the result?

I got no help from him

H. If your answer is NO, explain why not:

IV. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court (including the Central and Southern Districts of Illinois):

- A. Name of case and docket number: 07-05138 Amin Jumah V. Ozaukee County Jail.
- B. Approximate date of filing lawsuit: Sept/11/2007
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: Amin Jumah
- D. List all defendants: UNITED STATES OF AMERICA
DRUG ENFORCEMENT ADMINISTRATION
James Jones
Jim Lorien
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): Northern District of Illinois
- F. Name of judge to whom case was assigned: Judge Bucklo, later was
transfere to Judge Charles N. Cleverly in Wisconsin
- G. Basic claim made: Civil/Federal
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): Pending
- I. Approximate date of disposition: 09/11/2007

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

V. Statement of Claim:

State here as briefly as possible the facts of your case. Describe precisely how each defendant is involved. Include also the names of other persons involved, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

I am including a statement with short details .I do have the
the evidence at the Court request.

I had worked for the FBI, Costumes, Secret Service, and local enforcement
for the past 12 years and I got paid on my cases 20% and some cases
are pending in Courts.

I do have all contracts and official documents

from DEA and FBI and other department I worked for in the past

I was sign up with DEA Agent Jim Lorien and James Jones for the North-
ern star case. The case took almost one year and I work day and night

with the Agents to get the right information about every person invol-
-ved in this case, but when i called Agent Jim Lorien right after the

Bust went down he refaird me to his partner James Jones and Agent
Jones took me for a ride for over 8 months and I did not get paid
on this case and 2 other cases.

VI. Relief:

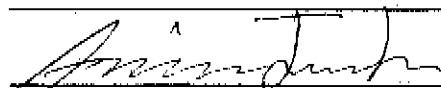
State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I am respectfully asking the Honorable Court to help me get the DEA to
Honor the agreement or the contract we have and get paid for the work
I did for the department.

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 12 day of Nov, 2007



(Signature of plaintiff or plaintiffs)

AMIN JUMAH

(Print name)

16819-424

(I.D. Number)

METROPOLITAN CORRECTIONAL CENTER

71 W Van Buren St. Chicago, IL 60605

(Address)